 <p>CD-052500</p>	<p>NEW MEXICO CORRECTIONS DEPARTMENT</p> <p><i>"We commit to the safety and well-being of the people of New Mexico by doing the right thing, always."</i></p> <p>Courage Responsibility Ethics Dedication - CREDibly serving the public safety of New Mexico</p>	
	<p>ISSUE DATE: 02/21/94</p> <p>EFFECTIVE DATE: 02/21/94</p>	<p>REVIEWED: 08/31/18</p> <p>REVISED: 03/06/15</p>
	<p>TITLE: PPD Use of FBI Form I-12 (Flash Notice) and Fingerprint Cards</p>	

AUTHORITY:

NMSA 1978, Section 31-21-7 (A), as amended.

REFERENCE:

ACA Standards 4-APPFS-1A-03, *Performance Based Standards for Adult Probation and Parole Field Services*, 4th Edition.

PURPOSE:

To establish guidelines for the use of the FBI form I-12.

APPLICABILITY:

All Probation and Parole Division staff responsible for completing FBI notices.

FORMS:

None

ATTACHMENTS:

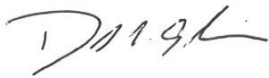
- A. **I-12 Flash Notice Instructions** Attachment (*CD-052501.A*)
- B. **Flash Notice Sample** Attachment (*CD-052501.B*)
- C. **Fingerprint Card Sample** Attachment (*CD-052501.C*)

DEFINITIONS:

None


POLICY: [4-APPFS-1A-03]

Supervising officers of the Probation and Parole Division shall submit FBI form I-12 (Flash Notice) and fingerprint cards to the New Mexico State Police on all New Mexico felons and misdemeanants being supervised in order to ensure positive identification, assist in the location of absconders, and to be advised of up-to-date offender information.



David Jablonski, Secretary of Corrections
New Mexico Corrections Department

08/31/18
Date

 <p>CD-052501</p>	<p>NEW MEXICO CORRECTIONS DEPARTMENT</p> <p><i>"We commit to the safety and well-being of the people of New Mexico by doing the right thing, always."</i></p> <p>Courage Responsibility Ethics Dedication - CREDibly serving the public safety of New Mexico</p>	
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	<p>TITLE: PPD Use of FBI Form I-12 (Flash Notice) and Fingerprint Cards</p>	

AUTHORITY:

Policy *CD-051600*

PROCEDURES: [4-APPFS-1A-03]

All Probation Parole staff responsible for submitting flash notices shall ensure the form is properly completed on every felony and misdemeanor probationer or parolee when the case is opened. The spaces provided for Agency, ORI number, and address, shall be completed, with the ORI number being the designated ORI number of the appropriate district office. For dual cases, the probation and parole staff will enter information on both probation and parole on one (1) flash notice.

A. Flash Notices:

A completed Form I-12 ("Flash Notice") advises the FBI of the disposition of a case, when an offender is placed on probation or parole, and/or when an inmate is released on parole.

B. Fingerprint Cards:

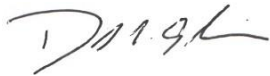
Three original fingerprint cards (available from the FBI) shall be completed and included in the Flash Notice packet sent to DPS. One original fingerprint card shall be placed in the back of the offender file, unless electronically submitted.

Fingerprints must be rolled from nail to nail and up from the knuckle.

C. Flash Notice packets:

All Flash Notice packets shall be distributed as directed by the **I-12 Flash Notice Instructions** Attachment (*CD-052501.A*) to:

New Mexico State Police
Attention: Identification Section
P. O. Box 1628
Santa Fe, New Mexico, 87505-9985



David Jablonski, Secretary of Corrections
New Mexico Corrections Department

08/31/18
Date

NEW MEXICO CORRECTIONS DEPARTMENT

I-12 Flash Notice Instructions

All Flash Notices shall be saved in the offender file located on the common drive and shall be printed in triplicate, creating three (3) copies on white or pink paper.

1. Initial notification

A flash notice shall be promptly completed on every felony and misdemeanor probationer or parolee when a case is opened. The disposition of the criminal charges must be noted on the form I-12, i.e., type of conviction, length of sentence and final disposition, such as conditional discharge, or deferred or suspended sentence.

2. Change in Termination Date

Whenever a change to a termination date occurs, the FBI must be notified within thirty (30) days. An amended flash notice shall be created indicating the length of probation and the new termination dates in the appropriate spaces. Failure to notify the FBI will result in the original flash being automatically canceled.

3. Cancellation notification

The FBI must be notified when an offender's custody is secured or information on him is no longer desired. A cancelled flash notice shall be created and submitted to the FBI when:

- a. The offender receives an early discharge from supervision;
- b. The absconder has been apprehended;
- c. The offender's probation or parole has been revoked; or
- d. The offender's probation or parole has expired and type of discharge, "Satisfactory" or "Unsatisfactory." Order on release of conditional discharge, order of dismissal on deferred sentence.

4. Flash Notice Packets

- a. An initial Flash Notice packet shall consist of the following:
Two (2) original fingerprint cards attached to two (2) copies of the form I-12 on white or pink paper, with picture attached.
- b. The change in termination Flash Notice packet shall consist of the following:
Two (2) copies of the amended Form I-12 on white or pink paper, unless electronically submitted.
- c. The cancellation Flash Notice packet shall consist of two (2) copy of the cancelled form I-1 on white or pink paper.

NEW MEXICO CORRECTIONS DEPARTMENT

Sample I-12 Flash Notice

Flash/Cancellation Notice
 I-12 (Rev. 9-28-99)

Date: _____

To: FBI, CJIS Division
 Clarksburg, WV 26306

Flash: _____ (date)	Expires _____ (date)	Parole _____ (date)	Expires: _____ (date)
Mandatory Release _____	Expires _____	SPT _____	Expires: _____
Supervised Release _____	Expires _____	PTD _____	Expires: _____
Probation _____	Expires _____		Expires: _____
When requesting flash notice, give the following information:			
Date and Place of Sentence:		Final Disposition	
Charge			
Contributor of Fingerprints			
<input type="checkbox"/> CANCEL (reason)			
Name		Residence	
Aliases	Numbers	Occupation	
	Arrest	Race	Sex
Military	Height		
FBI#		Alien	Weight
Date of Birth	Social Security	Hair	
Place of Birth			Scars, marks and tattoos
Agency Case or File Number		<input checked="" type="checkbox"/> Please Furnish Identification Record	
Agency *ORI#, and Address of Parties to be notified of Apprehension:		Agency, *ORI#, and Address of Contributor:	

NEW MEXICO CORRECTIONS DEPARTMENT

Fingerprint Card Sample

LEAVE BLANK		CRIMINAL		(STAPLE HERE)				LEAVE BLANK			
STATE USAGE		M-F INDEXING		SUBMISSION		APPROXIMATE CLASS		AMPLIFICATION		SCALE	
FINGER MARKS		SCARF MARKS		LEFT MARK		RIGHT MARK		MIDDLE MARK		RING MARK	
SIGNATURE OF PERSON FINGERPRINTED		SOCIAL SECURITY NO.		FEDERAL ID NO.		FEDERAL ID NO.		FEDERAL ID NO.		FEDERAL ID NO.	
ALIAS/ALIAS BEER		CAPT NAME		FIRST NAME		MIDDLE NAME		LAST NAME		MIDDLE NAME	
FBI NO.		STATE BAR NUMBER/NO.		OPEN OR BIRTH		MM		DD		YY	
C. F. T. USED		S. H. USED		S. H. USED		S. H. USED		S. H. USED		S. H. USED	
F. I. NO.		S. I. NO.		S. I. NO.		S. I. NO.		S. I. NO.		S. I. NO.	
L. I. NO.		R. I. NO.		R. I. NO.		R. I. NO.		R. I. NO.		R. I. NO.	
LEFT INDEX FINGER		LEFT MIDDLE FINGER		LEFT RING FINGER		LEFT PINKY FINGER		RIGHT INDEX FINGER		RIGHT MIDDLE FINGER	

**FEDERAL BUREAU OF INVESTIGATION, UNITED STATES DEPARTMENT OF JUSTICE
 CRIMINAL JUSTICE INFORMATION SERVICES DIVISION, CLARKSBURG, WV 26306**

PRIVACY ACT OF 1974 (P.L. 93-502) REQUIRES THAT FEDERAL AGENCIES INFORM INDIVIDUALS UNDER FEDERAL SECURITY NUMBER IS REQUESTED FOR SUCH SERVICE. SUCH SERVICE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH SOLICITATION, AND GRAB WHOSE FILE IS MADE OR IS.

THIS IS A FINGERPRINT CARD FOR THE FEDERAL BUREAU OF INVESTIGATION, UNITED STATES DEPARTMENT OF JUSTICE, CRIMINAL JUSTICE INFORMATION SERVICES DIVISION, CLARKSBURG, WV 26306.

NO. 010456
 PROB/PAROLE OFF
 ALBUQUERQUE, NM

DATE OF ARREST: MM DD YY
 CONTRIBUTOR ADDRESS: ALBUQUERQUE, NM
 DATE OF OFFENSE: MM DD YY
 PLACE OF BIRTH (STATE OR COUNTRY):
 COUNTRY OF CITIZENSHIP:

MISCELLANEOUS REMARKS: SCARF MARKS, TATTOOS, AND AMPUTATIONS
 RESIDENCE/COMPLETE ADDRESS: CITY STATE

OFFICIAL TAKING FINGERPRINTS (NAME OR NUMBER): LEGAL IDENTIFICATION/PREFERENCE: YES NO
 EMPLOYER: IF U.S. GOVERNMENT INDICATE SPECIFIC AGENCY OR BRANCH OF SERVICE AND NUMBER: OCCUPATION: YES NO

CHARGE/CITATION: DEPARTMENT: 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

ADDITIONAL INFORMATION/OTHER DATA: STATE BUREAU STAMP

FD-502 (REV. 5-81) U.S. GOVERNMENT PRINTING OFFICE: 1964 O-619750-0037